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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket No. 14231US02 First Inventor Cargin Title HAND HELD COMPUTERIZED DATA COLLECTION TERMINAL WITH RECHARGEABLE BATTERY PACK SENSOR AND BATTERY POWER CONSERVATION Express Mail Label No. EV 327 683 006 US																
APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <u>51</u>] <i>(preferred arrangement set forth below)</i> -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Description of the Drawings <i>(if filed)</i> -Detailed Description -Claim(s) -Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>15</u>] 5. Oath or Declaration [Total Sheets <u>10</u>] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & documents(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment (19 pp. and Abstract 1 p.) Return Receipt Postcard (MPEP 503) 14. <input checked="" type="checkbox"/> <i>(Should be specifically itemized)</i> Certified Copy of Priority Document(s) 15. <input type="checkbox"/> <i>(if foreign priority is claimed)</i> Nonpublication Request under 35 U.S.C. 122(b) 16. <input type="checkbox"/> (2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Other: <u>Appendix A (4 pp.), Appendix B (18 pp.),</u> <u>Appendix C (11 pp.)</u> <u>Replacement Fig. 19</u> 17. <input checked="" type="checkbox"/>																
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: <u>08/921,485</u> Prior application information: Examiner: <u>Emmanuel L. Moise</u> Art Unit: <u>2306</u> For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.																		
19. CORRESPONDENCE ADDRESS																		
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<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Name</td> <td colspan="2"></td> </tr> <tr> <td colspan="2">Address</td> <td colspan="2"></td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> <td></td> </tr> <tr> <td>Country</td> <td>Telephone</td> <td>Fax</td> <td></td> </tr> </table>			Name				Address				City	State	Zip Code		Country	Telephone	Fax	
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Name (Print/type) <u>Michael T. Cruz</u>		Registration No. (Attorney/Agent) <u>44,636</u>																
Signature <u>Michael T. Cruz</u>		Date <u>October 22, 2003</u>																

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15866 U.S. PTO

PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
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FEE TRANSMITTAL for FY 2004 Patent Fees are subject to annual revision.		Complete if Known	
		Application Number	Not Assigned
		Filing Date	Herewith
		First Named Inventor	Cargin
		Examiner Name	Moise
TOTAL AMOUNT OF PAYMENT (\$1,916.00)		Group Art Unit	2306
		Attorney Docket No.	14231US02

METHOD OF PAYMENT		FEE CALCULATION (continued)																																									
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES																																									
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**or number previously paid, if greater. For Reissues, see above		SUBTOTAL (3) (\$)																																									

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Michael T. Cruz	Registration No. (Attorney or Agent)	44,636
Signature	<i>Michael T. Cruz</i>	Telephone	312-775-8000
		Date	October 22, 2003

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